

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Restore America PAC, Inc.

ADDRESS (number and street)

P.O. Box 2275

☐Check if different  
than previously  
reported. (ACC)

Topeka

KS

66601

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00344333

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2009

through

12

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

T.C. Anderson

Signature of Treasurer

Electronically Filed by T.C. Anderson

Date

01

15

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 30

Write or Type Committee Name  
Restore America PAC, Inc.

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		
2009		15491.28
(b) Cash on Hand at Beginning of Reporting Period .....	30496.03	
(c) Total Receipts (from Line 19) .....	45092.89	96355.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	75588.92	111846.50
7. Total Disbursements (from Line 31) .....	41308.06	77565.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	34280.86	34280.86
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 30

Write or Type Committee Name

Restore America PAC, Inc.

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
1	2	0	3	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2000.00	2000.00
(ii) Unitemized .....	65.00	252.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2065.00	2252.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	12500.00	32500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	14565.00	34752.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	5134.13
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	30527.89	56469.09
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	45092.89	96355.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	45092.89	96355.22

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	13308.06	43465.64	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	13308.06	43465.64	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	27500.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	100.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	100.00	
29. Other Disbursements.....	5500.00	6500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41308.06	77565.64	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41308.06	77565.64	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 30

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	14565.00	34752.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14565.00	34652.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	13308.06	43465.64
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	5134.13
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	13308.06	38331.51

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 30

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)

AT&amp;T Inc. Federal PAC

Mailing Address 208 S. Akard St. #3521

City

Dallas

State

TX

Zip Code

75202

FEC ID number of contributing  
federal political committee.**C**

C00109017

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	9	

Transaction ID: 00115.C20905

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

National Cattlemens Beef Association PA

Mailing Address 9110 E. Nichols Ave.  
Suite 300

City

Englewood

State

CO

Zip Code

80112

FEC ID number of contributing  
federal political committee.**C**

C00028787

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	9	

Transaction ID: 90902.C20893

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

American Meat Institute PAC

Mailing Address 1150 Connecticut Ave. NW  
12th Floor

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C**

C00024281

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	9	

Transaction ID: 90902.C20894

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

7000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 30

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
American Veterinary Medical Assn. PAC

Mailing Address 1910 Sunderland Place NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00114132

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 9

Transaction ID: 00115.C20902

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Clear Channel Communications, Inc PAC

Mailing Address 200 E. Basse Road

City State Zip Code  
San Antonio TX 78209

FEC ID number of contributing  
federal political committee.

**C** C00279216

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 9

Transaction ID: 00115.C20909

Amount of Each Receipt this Period

2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
National Chicken Council PAC

Mailing Address 1015 15th St. NW  
Suite 930

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00034272

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 0 9

Transaction ID: 90902.C20895

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 30

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)

National Pork Producers PORK PAC

Mailing Address P.O. Box 10383

City

Des Moines

State

IA

Zip Code

50306

FEC ID number of contributing  
federal political committee.**C**

C00201871

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

Transaction ID: 90902.C20897

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

12500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)

United Egg Association EGGPAC

Mailing Address 1720 Windward Concourse  
Suite 230

City State Zip Code  
Alpharetta GA 30005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 0 9

Transaction ID: 90902.C20896

Amount of Each Receipt this Period

2000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City State Zip Code  
Herndon VA 20171-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31103.60

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 0 9

Transaction ID: 90902.C20899

Amount of Each Receipt this Period

5162.40

Other Receipt

**B.**

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City State Zip Code  
Herndon VA 20171-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35264.09

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 9

Transaction ID: 90902.C20900

Amount of Each Receipt this Period

4160.49

Other Receipt

**C.**

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City State Zip Code  
Herndon VA 20171-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40538.69

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 8 / 2 0 0 9

Transaction ID: 00115.C20901

Amount of Each Receipt this Period

5274.60

Other Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

14597.49

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City State Zip Code  
Herndon VA 20171-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

48611.53

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: 00115.C20907

Amount of Each Receipt this Period

8072.84

Other Receipt

**B.**

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City State Zip Code  
Herndon VA 20171-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52422.15

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 9

Transaction ID: 00115.C20908

Amount of Each Receipt this Period

3810.62

Other Receipt

**C.**

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City State Zip Code  
Herndon VA 20171-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

56469.09

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 9

Transaction ID: 00115.C20910

Amount of Each Receipt this Period

4046.94

Other Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

15930.40

**TOTAL** This Period (last page this line number only) .....

30527.89

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) CoreFirst Bank & Trust	<b>Transaction ID:</b> 00115.E1813																				
Mailing Address P.O. Box 5049	Date of Disbursement																				
City Topeka	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	0	9												
State KS	Amount of Each Disbursement this Period																				
Zip Code 66605-0049	<table border="1"> <tr> <td colspan="10">43.72</td> </tr> </table>	43.72																			
43.72																					
Purpose of Disbursement CREDIT CARD: SEE BELOW	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	CREDIT CARD: SEE BELOW																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 90902.E1783																				
Mailing Address P.O. Box 660108	Date of Disbursement																				
City Dallas	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	5	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8	/	1	5	/	2	0	0	9												
State TX	Amount of Each Disbursement this Period																				
Zip Code 75266-	<table border="1"> <tr> <td colspan="10">166.23</td> </tr> </table>	166.23																			
166.23																					
Purpose of Disbursement Telephone Service	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	TELEPHONE SERVICE																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Kelsey Smith Foundation	<b>Transaction ID:</b> 90709.E1760																				
Mailing Address P.O. Box 40393	Date of Disbursement																				
City Shawnee Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	0	7	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7	/	0	7	/	2	0	0	9												
State KS	Amount of Each Disbursement this Period																				
Zip Code 66204-	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
Category/ Type																					
Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	CONTRIBUTION																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**1209.95**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 00115.E1817																				
Mailing Address P.O. Box 660108	Date of Disbursement																				
City Dallas State TX Zip Code 75266-	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	2	/	2	0	0	9												
Purpose of Disbursement Telephone Service Candidate Name	Amount of Each Disbursement this Period																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	171.18																				
State: District:	TELEPHONE SERVICE																				
<b>B.</b> Full Name (Last, First, Middle Initial) CoreFirst Bank & Trust	<b>Transaction ID:</b> 00115.E1826																				
Mailing Address P.O. Box 5049	Date of Disbursement																				
City Topeka State KS Zip Code 66605-0049	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	5	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	0	5	/	2	0	0	9												
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name	Amount of Each Disbursement this Period																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	165.54																				
State: District:	CREDIT CARD: SEE BELOW																				
<b>C.</b> Full Name (Last, First, Middle Initial) Union Pub	<b>Transaction ID:</b> 00115.E1827																				
Mailing Address 201 Massachusetts Ave. NE	Date of Disbursement																				
City Washington State DC Zip Code 20002-	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	2	/	2	0	0	9												
Purpose of Disbursement Meeting Costs Candidate Name	Amount of Each Disbursement this Period																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	49.10																				
State: District:	<b>[MEMO ITEM]</b> MEMO: MEETING COSTS																				

SUBTOTAL of Disbursements This Page (optional) .....

336.72

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) CoreFirst Bank & Trust Mailing Address P.O. Box 5049	<b>Transaction ID:</b> 00115.E1798 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	9										
M	M	/	D	D	/	Y	Y	Y	Y																						
1	0		0	7		2	0	0	9																						
City Topeka State KS Zip Code 66605-0049 Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">109.68</td> </tr> </table> CREDIT CARD: SEE BELOW	109.68																													
109.68																															
<b>B.</b> Full Name (Last, First, Middle Initial) Union Pub Mailing Address 201 Massachusetts Ave. NE City Washington State DC Zip Code 20002- Purpose of Disbursement Meeting Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 00115.E1797 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">109.68</td> </tr> </table> <b>[MEMO ITEM]</b> MEMO: MEETING COSTS	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	3		2	0	0	9	109.68									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	9		2	3		2	0	0	9																						
109.68																															
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 660108 City Dallas State TX Zip Code 75266- Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 90902.E1769 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">150.81</td> </tr> </table> TELEPHONE SERVICE	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	9	150.81									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	7		1	5		2	0	0	9																						
150.81																															

**SUBTOTAL** of Disbursements This Page (optional) .....

**260.49**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 00115.E1807 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 660108	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	7		2	0	0	9												
City Dallas State TX Zip Code 75266-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">150.64</td> </tr> </table>	150.64																			
150.64																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>TELEPHONE SERVICE</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Riley Scott	<b>Transaction ID:</b> 90709.E1761 <b>Date of Disbursement</b>																				
Mailing Address 1101 Saint Paul St. #312	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	7		2	0	0	9												
City Baltimore State MD Zip Code 21202-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising Consulting Fee Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>FUNDRAISING CONSULTING FEE</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 00115.E1816 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 660108	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	2		2	0	0	9												
City Dallas State TX Zip Code 75266-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">153.85</td> </tr> </table>	153.85																			
153.85																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>TELEPHONE SERVICE</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**5304.49**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
CoreFirst Bank & Trust

Mailing Address P.O. Box 5049

City State Zip Code  
Topeka KS 66605-0049

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00115.E1792

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.18

CREDIT CARD: SEE BELOW

**B.**

Full Name (Last, First, Middle Initial)  
Union Pub

Mailing Address 201 Massachusetts Ave. NE

City State Zip Code  
Washington DC 20002-

Purpose of Disbursement  
Meeting Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00115.E1793

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.18

[MEMO ITEM]

MEMO: MEETING CHARGES

**C.**

Full Name (Last, First, Middle Initial)  
T.C. Anderson

Mailing Address 2436 SW Camelot Pl.

City State Zip Code  
Topeka KS 66614-

Purpose of Disbursement  
Phone Internet & Mileage Expense R

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00115.E1831

Date of Disbursement

/   /

Amount of Each Disbursement this Period

78.69

PHONE INTERNET & MILEAGE  
EXPENSE R

**SUBTOTAL** of Disbursements This Page (optional) .....

130.87

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 00115.E1808
Mailing Address P.O. Box 660108	Date of Disbursement
City Dallas State TX Zip Code 75266-	<div> <div>10</div> <div>17</div> <div>2009</div> </div>
Purpose of Disbursement Telephone Service	Amount of Each Disbursement this Period
Candidate Name	<div>144.92</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TELEPHONE SERVICE
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 00115.E1839
Mailing Address P.O. Box 660108	Date of Disbursement
City Dallas State TX Zip Code 75266-	<div> <div>12</div> <div>15</div> <div>2009</div> </div>
Purpose of Disbursement Telephone Service	Amount of Each Disbursement this Period
Candidate Name	<div>150.64</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TELEPHONE SERVICE
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 00115.E1840
Mailing Address P.O. Box 660108	Date of Disbursement
City Dallas State TX Zip Code 75266-	<div> <div>12</div> <div>15</div> <div>2009</div> </div>
Purpose of Disbursement Telephone Service	Amount of Each Disbursement this Period
Candidate Name	<div>144.60</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	TELEPHONE SERVICE
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**440.16**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
CoreFirst Bank & Trust

Mailing Address P.O. Box 5049

City State Zip Code  
Topeka KS 66605-0049

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 90902.E1771

Date of Disbursement

/   /

Amount of Each Disbursement this Period

82.39

CREDIT CARD: SEE BELOW

**B.**

Full Name (Last, First, Middle Initial)  
Union Pub

Mailing Address 201 Massachusetts Ave. NE

City State Zip Code  
Washington DC 20002-

Purpose of Disbursement  
Meeting Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 90902.E1775

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.04

**[MEMO ITEM]**

MEMO: MEETING EXPENSE

**C.**

Full Name (Last, First, Middle Initial)  
CoreFirst Bank & Trust

Mailing Address P.O. Box 5049

City State Zip Code  
Topeka KS 66605-0049

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 90709.E1749

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3.99

CREDIT CARD: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

86.38

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) CoreFirst Bank & Trust Mailing Address P.O. Box 5049 City Topeka State KS Zip Code 66605-0049 Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 00115.E1799 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 9 Amount of Each Disbursement this Period 25.73 CREDIT CARD: SEE BELOW
<b>B.</b> Full Name (Last, First, Middle Initial) CoreFirst Bank & Trust Mailing Address P.O. Box 5049 City Topeka State KS Zip Code 66605-0049 Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 00115.E1791 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 9 Amount of Each Disbursement this Period 3.99 CREDIT CARD: SEE BELOW
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 660108 City Dallas State TX Zip Code 75266- Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 00115.E1790 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 9 Amount of Each Disbursement this Period 154.25 TELEPHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) .....

183.97

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151-

Purpose of Disbursement  
Caging & Escrow Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 00115.E1819

Date of Disbursement

/   /

Amount of Each Disbursement this Period

122.52

CAGING & ESCROW SERVICES

**B.** Full Name (Last, First, Middle Initial)  
Sunrise Data Services

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
Mailing List Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 90902.E1780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

270.00

MAILING LIST SERVICE

**C.** Full Name (Last, First, Middle Initial)  
CoreFirst Bank & Trust

Mailing Address P.O. Box 5049

City Topeka State KS Zip Code 66605-0049

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 90902.E1772

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3.99

CREDIT CARD: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

396.51

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) T.C. Anderson	<b>Transaction ID:</b> 00115.E1788 <b>Date of Disbursement</b>																				
Mailing Address 2436 SW Camelot Pl.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	4		2	0	0	9												
City State Zip Code Topeka KS 66614- Purpose of Disbursement Phone Internet Software Mileage Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>225.22</td> </tr> </table>	225.22																			
225.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type  PHONE INTERNET SOFTWARE MILEAGE																				
<b>B.</b> Full Name (Last, First, Middle Initial) Trella Anderson	<b>Transaction ID:</b> 90709.E1751 <b>Date of Disbursement</b>																				
Mailing Address 2426 SW Camelot Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	4		2	0	0	9												
City State Zip Code Topeka KS 66614- Purpose of Disbursement Accounting Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type  ACCOUNTING SERVICES																				
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 90902.E1784 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 660108	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	0	9												
City State Zip Code Dallas TX 75266- Purpose of Disbursement Telephone Service Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>150.83</td> </tr> </table>	150.83																			
150.83																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type  TELEPHONE SERVICE																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1876.05

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address P.O. Box 660108

City Dallas State TX Zip Code 75266-

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 90902.E1768

Date of Disbursement

/   /

Amount of Each Disbursement this Period

154.23

TELEPHONE SERVICE

**B.**

Full Name (Last, First, Middle Initial)  
Sunrise Data Services

Mailing Address 13755 Sunrise Valley Dr.  
Suite 450

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
Mailing List Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 00115.E1820

Date of Disbursement

/   /

Amount of Each Disbursement this Period

215.00

MAILING LIST SERVICE

**C.**

Full Name (Last, First, Middle Initial)  
CoreFirst Bank & Trust

Mailing Address P.O. Box 5049

City Topeka State KS Zip Code 66605-0049

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 90709.E1750

Date of Disbursement

/   /

Amount of Each Disbursement this Period

131.24

CREDIT CARD: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

500.47

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

**A.**

Full Name (Last, First, Middle Initial)  
Union Pub

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement  
Meeting Costs  
Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 90709.E1753  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.59

**[MEMO ITEM]**

MEMO: MEETING COSTS

**B.**

Full Name (Last, First, Middle Initial)  
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151-

Purpose of Disbursement  
Caging & Escrow Services  
Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00115.E1802  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

141.80

CAGING & ESCROW SERVICES

**C.**

Full Name (Last, First, Middle Initial)  
T.C. Anderson

Mailing Address 2436 SW Camelot Pl.

City Topeka State KS Zip Code 66614-

Purpose of Disbursement  
Phone Internet & Mileage Reimburse  
Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00115.E1801  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

93.06

PHONE INTERNET & MILEAGE  
REIMBURSE

**SUBTOTAL** of Disbursements This Page (optional) .....

234.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Sunrise Data Services	<b>Transaction ID:</b> 00115.E1838 <b>Date of Disbursement</b>																				
Mailing Address 13755 Sunrise Valley Dr. Suite 450	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	9												
City Herndon State VA Zip Code 20171-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Mailing List Service Candidate Name	<table border="1"> <tr> <td colspan="10">215.00</td> </tr> </table>	215.00																			
215.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type  MAILING LIST SERVICE																				
<b>B.</b> Full Name (Last, First, Middle Initial) Washington Intelligence Bureau	<b>Transaction ID:</b> 90902.E1779 <b>Date of Disbursement</b>																				
Mailing Address 4128 Pepsi Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	6		2	0	0	9												
City Chantilly State VA Zip Code 20151-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Caging & Escrow Services Candidate Name	<table border="1"> <tr> <td colspan="10">173.32</td> </tr> </table>	173.32																			
173.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type  CAGING & ESCROW SERVICES																				
<b>C.</b> Full Name (Last, First, Middle Initial) Washington Intelligence Bureau	<b>Transaction ID:</b> 00115.E1837 <b>Date of Disbursement</b>																				
Mailing Address 4128 Pepsi Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	9												
City Chantilly State VA Zip Code 20151-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Caging & Escrow Services Candidate Name	<table border="1"> <tr> <td colspan="10">275.66</td> </tr> </table>	275.66																			
275.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type  CAGING & ESCROW SERVICES																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**663.98**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) T.C. Anderson Mailing Address 2436 SW Camelot Pl.	<b>Transaction ID:</b> 90709.E1758 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 6 / 2 0 0 9</div> </div>
City Topeka State KS Zip Code 66614- Purpose of Disbursement Mileage & Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>91.64</div> <b>MILEAGE &amp; TELEPHONE EXPENSE</b>
<b>B.</b> Full Name (Last, First, Middle Initial) T.C. Anderson Mailing Address 2436 SW Camelot Pl.	<b>Transaction ID:</b> 00115.E1818 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 3 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>78.90</div> <b>PHONE INTERNET MILEAGE REIMBURSEMENT</b>
<b>C.</b> Full Name (Last, First, Middle Initial) CoreFirst Bank & Trust Mailing Address P.O. Box 5049	<b>Transaction ID:</b> 00115.E1814 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 4 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>50.33</div> <b>CREDIT CARD: SEE BELOW</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**220.87**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> 00115.E1812 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 660108	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	9												
City Dallas State TX Zip Code 75266-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Telephone Expense Candidate Name	<table border="1"> <tr> <td colspan="10">24.99</td> </tr> </table>	24.99																			
24.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: TELEPHONE EXPENSE																				
<b>B.</b> Full Name (Last, First, Middle Initial) T.C. Anderson	<b>Transaction ID:</b> 90902.E1770 <b>Date of Disbursement</b>																				
Mailing Address 2436 SW Camelot Pl.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	5		2	0	0	9												
City Topeka State KS Zip Code 66614-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Data Phone & Mileage Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">78.39</td> </tr> </table>	78.39																			
78.39																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>DATA PHONE &amp; MILEAGE REIM-BURSEMENT</b>																				
<b>C.</b> Full Name (Last, First, Middle Initial) Valley Self Storage	<b>Transaction ID:</b> 00115.E1825 <b>Date of Disbursement</b>																				
Mailing Address 4101 SW Twilight Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	1		2	0	0	9												
City Topeka State KS Zip Code 66614-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Storage Fee Candidate Name	<table border="1"> <tr> <td colspan="10">660.00</td> </tr> </table>	660.00																			
660.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>STORAGE FEE</b>																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**738.39**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 30

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless		<b>Transaction ID:</b> 00115.E1789 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	4		2	0	0	9													
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">150.83</td> </tr> </table>	150.83																			
150.83																						
City Dallas State TX Zip Code 75266-	Category/ Type																					
Purpose of Disbursement Telephone Service																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TELEPHONE SERVICE																				
<b>B.</b> Full Name (Last, First, Middle Initial) Sunrise Data Services		<b>Transaction ID:</b> 00115.E1803 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	0		2	0	0	9													
Mailing Address 13755 Sunrise Valley Dr. Suite 450		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">320.00</td> </tr> </table>	320.00																			
320.00																						
City Herndon State VA Zip Code 20171-	Category/ Type																					
Purpose of Disbursement Mailing List Service																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MAILING LIST SERVICE																				

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

470.83

**TOTAL** This Period (last page this line number only) ..... ►

13054.99

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Grassley Committee Inc. Mailing Address P.O. Box 1000	<b>Transaction ID:</b> 00115.E1842 <b>Date of Disbursement</b> <div> <div>12</div> <div>31</div> <div>2009</div> </div>
City Des Moines State IA Zip Code 50304- Purpose of Disbursement 2010 PRIMARY CONTRIBUTION Candidate Name CHARLES E GRASSLEY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 00	Amount of Each Disbursement this Period <div>5000.00</div> 2010 PRIMARY CONTRIBUTION
<b>B.</b> Full Name (Last, First, Middle Initial) Jane Norton For Colorado Mailing Address 6400 S. Fiddlers Green Circle City Englewood State CO Zip Code 80111- Purpose of Disbursement 2010 PRIMARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 00115.E1796 <b>Date of Disbursement</b> <div> <div>10</div> <div>06</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>5000.00</div> 2010 PRIMARY
<b>C.</b> Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress Mailing Address Box 1441 City Topeka State KS Zip Code 66601- Purpose of Disbursement CONTRIBUTION-2010 PRIMARY Candidate Name LYNN JENKINS FOR CONGRESS Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 00115.E1815 <b>Date of Disbursement</b> <div> <div>11</div> <div>10</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>2500.00</div> CONTRIBUTION-2010 PRIMARY

**SUBTOTAL** of Disbursements This Page (optional) .....

**12500.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 / 30

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.**A.**Full Name (Last, First, Middle Initial)  
PatPac

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606-

Purpose of Disbursement  
PRIMARYCandidate Name  
PRESERVING AMERICAS TRADITIONS (PATPAC)Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2010 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 90709.E1759

Date of Disbursement

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 0 9

Amount of Each Disbursement this Period

5000.00

PRIMARY

**B.**Full Name (Last, First, Middle Initial)  
Friends of Roy Blunt

Mailing Address P.O. Box 50100

City Springfield State MO Zip Code 65805-

Purpose of Disbursement  
2010 PRIMARYCandidate Name  
FRIENDS OF ROY BLUNTCategory/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2010 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00115.E1795

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 8 / 2 0 0 9

Amount of Each Disbursement this Period

5000.00

2010 PRIMARY

SUBTOTAL of Disbursements This Page (optional) .....

10000.00

TOTAL This Period (last page this line number only) .....

22500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Restore America PAC, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Schmidt For Attorney General, Inc.	<b>Transaction ID:</b> 00115.E1809 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 804	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	0	9												
City Independence State KS Zip Code 67301-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PRIMARY 2010 CONTRIBUTION	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Brownback For Governor, Inc.	<b>Transaction ID:</b> 00115.E1841 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 3739	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	9		2	0	0	9												
City Topeka State KS Zip Code 66604-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2010 PRIMARY	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Kansas Republican Party	<b>Transaction ID:</b> 00115.E1832 <b>Date of Disbursement</b>																				
Mailing Address 2025 SW Gage Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	6		2	0	0	9												
City Topeka State KS Zip Code 66604-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 2009 CONTRIBUTION	<table border="1"> <tr> <td>3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

5500.00